



OFFICE OF PUBLIC INSTRUCTION

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Linda McCulloch
Superintendent

May 2006

TO: Special Education/Cooperative Directors
Candidates Currently in the Speech-Language Pathology Traineeship Program
Candidates Interested in Applying for a Speech-Language Pathology Traineeship

FROM: Susan Bailey-Anderson
CSPD Coordinator/SPDG Director

Marilyn Pearson
Assistant Director, Division of Special Education

RE: Traineeships for Speech-Language Pathology Training

The Montana Office of Public Instruction is pleased to offer approximately 10 traineeships for individuals who hold a bachelor's degree in speech-language pathology or in another field to complete the necessary requirements for licensure as a speech-language pathologist in Montana. Successful applicants will be provided traineeships on a continuing basis, for a period not to exceed five years, until they meet the requirements for licensing in Montana as a speech-language pathologist.

In order to receive a traineeship, the applicant must:

- Have a bachelor's degree in speech-language pathology or a related field;
- Be currently employed in a Montana public school; and
- Be enrolled in a speech-language program that will lead to the completion of the requirements for a master's degree in speech-language pathology; or
- In the case of an individual holding a bachelor's degree in another field, be registered for courses that serve as the necessary prerequisites to be accepted into a program leading to a master's degree in speech-language pathology and have a letter from the director of the master's program that states that the prerequisite courses that the applicant is registered to take will fully meet the requirements for entry into the master's program.

Traineeship awards will be made for up to a maximum of \$2,500 per state fiscal year (July 1-June 30) and be provided based on the following:

1. The actual cost of tuition (course fees) and books, or

"It is the mission of the Office of Public Instruction to improve teaching and learning through communication, collaboration, advocacy, and accountability to those we serve."

2. The actual costs of tuition, books, fees and housing when a student must live out of state for a portion of the time to participate in the master's program.

Note: If the actual costs of the program are less than \$2,500 per fiscal year, the successful applicant would only receive reimbursement for up to the actual cost, not the full \$2,500.

Reimbursement will be provided to the successful applicant based on the applicant providing the Office of Public Instruction with the following documentation:

- An approved application on file with the Office of Public Instruction, Division of Special Education;
- Provision of a receipt from the university that identifies the courses in which the applicant has enrolled and the cost of the tuition for each;
- For continuing participants, a copy of the grade transcript for the preceding semester; and
- Completed progress report (current year).

For those candidates who have previously received traineeships, you will once again need to provide a progress report in a narrative form detailing how many summers you expect to attend school before meeting all requirements for licensure and your anticipated completion date. Thank you for your interest in the traineeships and continuing education toward the requirements for licensure.

If you have questions regarding the traineeship program, please call Susan Bailey-Anderson at (406) 444-2046 or Marilyn Pearson at (406) 444-4428.

Enclosures

IDEA-PART B PERSONNEL TRAINING

APPLICATION FOR SPEECH-LANGUAGE PATHOLOGY TRAINEESHIP

(To Be Completed By Individuals Who Hold A Bachelor's Degree In Speech-Language Pathology)

Applicant's Name: _____
First Middle Last

Address: _____

City State ZIP

Social Security No. _____ Telephone: (w) _____ (h) _____

E-mail Address: _____

Currently Employed by: _____
School District/Special Education Cooperative

I currently hold a bachelor's degree in: _____

If a speech aide, the name of your Speech-Language Pathologist Supervisor:

Supervisor Name: _____

ASSURANCE STATEMENTS

I, _____, am committed to completion of the State Board of Speech-Language Pathology and Audiology Licensure requirements for my speech-language pathology license in Montana. In addition, I am committed to working as a speech-language pathologist in Montana schools for a period of two years after I have completed licensure requirements as a speech-language pathologist. I understand that failure to provide speech/language services in Montana schools would require me to pay back to the Office of Public Instruction the total amount of funds I received as stipends.

Signature

Date

Check each statement that applies to you and include the documentation for each item checked.

_____ I am enrolled in a master's program for a speech-language pathology degree. (Attach a statement from the program director that states you have been accepted into the master's program and the approximate time it will require for completion of the program, i.e., how many years.) For continuing participants, please attach a letter stating that you are continuing to enroll in the master's program of your choice (e.g., Northern Arizona University, University of Wyoming, University of Northern Colorado, Minot State, etc.)

_____ I am taking the required prerequisite classes for entry into a program leading to a master's degree in speech-language pathology. (Attach a statement from the master's program director that states that the classes for which you are enrolled will be accepted as meeting one or more of the requirements for entry into the master's program.)

_____ I have signed a contract for the 2006-2007 school year as a speech aide or teacher in the public schools. (Attach a letter to this effect from school/cooperative administration.)

Send this completed application to:

Susan Bailey-Anderson
CSPD Coordinator
Office of Public Instruction
PO Box 202501
Helena, MT 59620-2501

	Linda McCulloch, Superintendent Office of Public Instruction PO Box 202501 Helena, MT 59620-2501 www.opi.mt.gov
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